## **Application Data Sheet**

## **Application Information**

Application Type::

Regular

**Subject Matter::** 

Utility

Suggested classification::

**Suggested Group Art Unit::** 

Unassigned

CD-ROM or CD-R?::

None

Computer Readable Form (CRF)?::

No

Title::

METHOD AND FRAMEWORK FOR

TRANSACTION SYNCHRONIZATION

**Attorney Docket Number::** 

038927-0203

Request for Early Publication?::

No

Request for Non-Publication?::

No

**Suggested Drawing Figure:** 

5

**Total Drawing Sheets::** 

7

**Small Entity?::** 

Yes

Petition included?::

No

Secrecy Order in Parent Appl.?::

No

## **Applicant Information**

**Applicant Authority Type::** 

Inventor

**Primary Citizenship Country::** 

US

Status::

**Full Capacity** 

Given Name::

Jeffrey

Family Name::

Capone

City of Residence::

Scottsdale

State or Province of

Residence::

Country of Residence:: US

Street of mailing address:: 4111 N. Drinkwater Blvd., #309

Arizona

City of mailing address:: Scottsdale

State or Province of mailing AZ

address::

Postal or Zip Code of mailing 85251

address::

Applicant Authority Type:: Inventor

Primary Citizenship Country:: India

Status:: Full Capacity

Given Name:: Pramod

Family Name:: Immaneni

City of Residence:: Temple

State or Province of Arizona

Residence::

Country of Residence:: US

Street of mailing address:: 1115 E. Lemon Street, #125

City of mailing address:: Temple

State or Province of mailing AZ

address::

Postal or Zip Code of mailing 85281

address::

Applicant Authority Type:: Inventor

Primary Citizenship Country:: INDIA

Status:: Full Capacity

Given Name:: Sudhakiran Venkata

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Family Name:: Mudiam

•				•		
City of Residence::		Chandler				
State or Province of		Arizona				
Residence::			•			
Country of Residence	e::	US				
Street of mailing add	iress::	1145 E L	ocust Dr.			
City of mailing addre	ess::	Chandler				
State or Province of	mailing	AZ				
address::						
Postal or Zip Code o	f mailing	85249				
address::						
Correspondence Infe	ormation					
Correspondence Cu	stomer Nur	mber:: 2	3392			
E-Mail address:: PTOMailLosAngeles@FoleyLaw.com						
Representative Infor	mation					
Representative Cust	omer	23392				
Number::						
	<u>.</u>					
Domestic Priority In	formation					
Application::	Continuity	Type::	Parent	Parent Filing		
			Application::	Date::		

## Foreign Priority Information

Country::	Application	Filing Date::	Priority Claimed::
	number::		

Assignee Information	As	sian	ee	Infor	matioi	1
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Assignee name::

Aligo Inc.